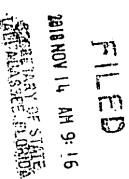
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COVER LETTER

TO:	Registration Section Division of Corporations				
	WEFFLC				
SUBJI	ECT:	Name of Lim	ited Liability Company	<u> </u>	
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please	return all correspo	ndence concerning this matter	to the following:		
		ERICA A. ROMERA			
Name of Person WEF LLC Firm/Company 3030 JON JON CT					
		WEFILC			
			Firm/Company		
		3030 JON JON CT			
			Address	.	
		ORLANDO, FL32822			
		ericaromera@hotmail.com	City/State and Zip Code		
		E-mail address: (to be used for future annual report no	otification)	
For fur	ther information c	oncerning this matter, please ca	all:		
Erica I	Romera €		321 9452315		
	Name o	f Person	at () Area Code Dayti	ine Telephone Number	
Enclos	ed is a check for th	ne following amount:			
\$ 2:	5,00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

WEFLEC		
(<u>Name of the Limited Liabil</u> (A Florid	ity Company as it now appears on our records.) a Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number 1.17000003183	Company were filed on JANUARY 04, 2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company." the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
		F10 5 T1
	mend the following: e new name of the limited liability company here: and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "LLC." ress, if applicable: BE A STREET ADDRESS) pplicable: ST OFFICE BOX) d agent and/or registered office address on our records, enter the name of the new registered office address here: d Agent:	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		120
		<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office add		<u>iter the name of the nev</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	. Florida	a
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	WALTER QUEVEDO		
		2000 PAST PAST CENTRAL AND	D Add
		3030 JON JON CT ORLANDO FL 32822	■ Remove
			Change
			□ Add
			□ Remove
			☐ Change
			Remove To Change
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		- .	
E. Effective date, if other than the date of filing:	to date of filing or more than 90 days after filin	ng.) Pursuana	to 605,0207 (
Note: If the date inserted in this block does not meet the applied document's effective date on the Department of State's records.	able statutory filing requirements, this dat	e will not b	e listed as th
If the record specifies a delayed effective date, but not (b) The 90th day after the record is filed.	t an effective time, at 12:01 a.m	. on the ϵ	earlier of:
NOVEMBER 09 2018			
Dated,	<u></u> .		
Muc Dower			
The state of the s	orized representative of a member		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00